WISSOTA HEALTH & REGIONAL VENT CENTER

7490 156TH STREET

CHIPPEWA FALLS 54729 Phone: (715) 723-9341 Ownership: Limited Liability Company Operated from 1/1 To 12/31 Days of Operation: 365 Skilled Highest Level License: Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/05): 100 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/05): 120 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/05: 44 Average Daily Census: 157 *************************************

Age, Gender, and Primary Diagnosis	Length of Stay (12/31/05)								
Primary Diagnosis	8 8	Age Groups 	*	Less Than 1 Year					
Developmental Disabilities	4.5	Under 65	36.4	More Than 4 Years	50.0				
Mental Illness (Org./Psy)	31.8	65 - 74	9.1						
Mental Illness (Other)	27.3	75 – 84	27.3		100.0				
Alcohol & Other Drug Abuse	0.0	85 - 94	25.0						
Para-, Quadra-, Hemiplegic	2.3	95 & Over	2.3	Full-Time Equivalent					
Cancer	0.0			Nursing Staff per 100 Resid	dents				
Fractures	0.0		100.0	(12/31/05)					
Cardiovascular	2.3	65 & Over	63.6						
Cerebrovascular	4.5			RNs	35.4				
Diabetes	4.5	Gender	%	LPNs	45.3				
Respiratory	22.7			Nursing Assistants,					
Other Medical Conditions	0.0	Male	38.6	Aides, & Orderlies	158.8				
		Female	61.4						
	100.0								
			100.0						

Method of Reimbursement

		Medicare 'itle 18			edicaid itle 19			Other			Private Pay	2		amily Care			anaged Care	<u>l</u>		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	2.4	149	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	2.3
Skilled Care	1	100.0	177	30	73.2	128	0	0.0	0	2	100.0	165	0	0.0	0	0	0.0	0	33	75.0
Intermediate				1	2.4	108	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	2.3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	9	22.0	450	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	9	20.5
Total	1	100.0		41	100.0		0	0.0		2	100.0		0	0.0		0	0.0		44	100.0

WISSOTA HEALTH & REGIONAL VENT CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, an	d Activities as of 12	/31/05
Deaths During Reporting Period			Total				
Percent Admissions from:		Activities of	%		% Needing sistance of	% Totally	Number o
Private Home/No Home Health	100.0	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Resident
Private Home/With Home Health	0.0	Bathing	0.0		61.4	38.6	44
Other Nursing Homes	0.0	Dressing	0.0		75.0	25.0	44
Acute Care Hospitals	0.0	Transferring	2.3		45.5	52.3	44
Psych. HospMR/DD Facilities	0.0	Toilet Use	2.3		40.9	56.8	44
Rehabilitation Hospitals	0.0	Eating	15.9		59.1	25.0	44
Other Locations	0.0	******	* * * * * * * * * * * * * * *	****	* * * * * * * * * * * * * * * * * *	******	*****
Cotal Number of Admissions	2	Continence		용	Special Treatmen	ts	용
Percent Discharges To:		Indwelling Or Extern	nal Catheter	18.2	Receiving Resp	iratory Care	29.5
Private Home/No Home Health	2.4	Occ/Freq. Incontiner	nt of Bladder	56.8	Receiving Trac	heostomy Care	20.5
Private Home/With Home Health	0.0	Occ/Freq. Incontiner	nt of Bowel	63.6	Receiving Suct	ioning	20.5
Other Nursing Homes	69.5				Receiving Osto	my Care	2.3
Acute Care Hospitals	0.0	Mobility			Receiving Tube	Feeding	6.8
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	6.8	Receiving Mech	anically Altered Diet	s 54.5
Rehabilitation Hospitals	0.0						
Other Locations	0.6	Skin Care			Other Resident C	haracteristics	
Deaths	22.2	With Pressure Sores		2.3	Have Advance D	irectives	63.6
Total Number of Discharges		With Rashes		4.5	Medications		
(Including Deaths)	167				Receiving Psyc	hoactive Drugs	61.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

		Own	ership:	Bed	Size:	Lic	ensure:				
	This Proprietary Facility Peer Group		prietary	100	-199	Ski	lled	Al	1		
			Peer	Group	Peer Group		Faci	lities			
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio		
Occupancy Rate: Average Daily Census/Licensed Beds	65.3	85.8	0.76	90.1	0.72	88.8	0.73	88.1	0.74		
Current Residents from In-County	45.5	81.3	0.56	84.9	0.54	83.2	0.55	77.6	0.59		
Admissions from In-County, Still Residing	0.0	16.8	0.00	18.1	0.00	18.7	0.00	18.1	0.00		
Admissions/Average Daily Census	1.3	216.2	0.01	188.0	0.01	177.7	0.01	162.3	0.01		
Discharges/Average Daily Census	106.4	217.8	0.49	191.1	0.56	179.2	0.59	165.1	0.64		
Discharges To Private Residence/Average Daily Census	2.5	100.9	0.03	87.1	0.03	83.4	0.03	74.8	0.03		
Residents Receiving Skilled Care	77.3	97.2	0.80	96.6	0.80	96.3	0.80	92.1	0.84		
Residents Aged 65 and Older	63.6	91.5	0.70	90.0	0.71	91.3	0.70	88.4	0.72		
Title 19 (Medicaid) Funded Residents	93.2	61.7	1.51	62.3	1.50	61.8	1.51	65.3	1.43		
Private Pay Funded Residents	4.5	19.4	0.23	20.8	0.22	22.5	0.20	20.2	0.23		
Developmentally Disabled Residents	4.5	0.9	5.22	0.9	4.80	1.1	4.13	5.0	0.91		
Mentally Ill Residents	59.1	28.9	2.05	34.5	1.71	34.8	1.70	32.9	1.80		
General Medical Service Residents	0.0	23.7	0.00	22.0	0.00	23.0	0.00	22.8	0.00		
Impaired ADL (Mean)	68.2	47.9	1.42	48.8	1.40	48.4	1.41	49.2	1.39		
Psychological Problems	61.4	59.1	1.04	59.9	1.03	59.5	1.03	58.5	1.05		
Nursing Care Required (Mean)	17.6	7.1	2.49	7.3	2.43	7.2	2.45	7.4	2.37		